

16805 U.S. PTO

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

UTILITY PATENT
Date: June 20, 2003
File No. 2322.68094

6015 U.S. PTO
10/600197
06/20/03

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): Gerrit Jäger

For: METHOD FOR PRODUCING A RIM AND
A RIM, PARTICULARLY FOR A BICYCLE

I hereby certify that this paper is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date:

June 20, 2003
Date

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Express Mail Label No.: EL846179320US

Enclosed are:

- (X) 17 pages of specification, including 21 claims and an abstract.
- () an executed oath or declaration, with power of attorney.
- (X) an unexecuted oath or declaration, with power of attorney.
- (X) 4 sheet(s) of informal drawing(s).
- () sheet(s) of formal drawings(s).
- () Assignment(s) of the invention to DT Swiss AG.
- () Assignment Form Cover Sheet.
- () A check in the amount of \$ 40.00 to cover the fee for recording the assignment(s) is enclosed.
- () Information Disclosure Statement.
- () Associate power of attorney.
- () Priority Document.
- (X) Preliminary Amendment

Fee Calculation For Claims As Filed

a) Basic Fee						\$ 750.00
b) Independent Claims	<u>2</u>	-	<u>3</u>	=	<u>0</u>	x \$ 84.00 = \$ <u>0</u>
c) Total Claims	<u>20</u>	-	<u>20</u>	=	<u>0</u>	x \$ 18.00 = \$ <u>0</u>
d) Fee for Multiple Dependent Claims						\$280.00 = \$ <u>0</u>
Total Filing Fee						\$ <u>750.00</u>

(X) Applicant qualifies as a Small Entity, reducing Filing Fee by half to \$ 375.00

(X) A check in the amount of \$ 375.00 to cover the filing fee is enclosed.

() Charge \$ _____ to Deposit Account No. 07-2069.

() Other _____

(X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

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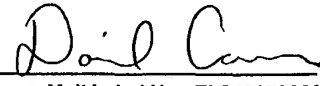
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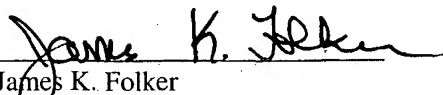
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